

POSITION	INITIALS	ID No.	DATE
FEE DETERMINATION	<i>CS</i>	<i>68225</i>	<i>9/28/98</i>
O.I.P.E. CLASSIFIER		<i>25</i>	<i>03-29-98</i>
FORMALITY REVIEW		<i>61501</i>	<i>10/1</i>

**INDEX OF CLAIMS**

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral) Canceled	A	Appeal
+	Restricted	O	Objected

Claim	Date
Final Original	8 9 10 11 12 13
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
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41	✓
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44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final Original	
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Claim	Date
Final Original	
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If more than 150 claims or 10 actions  
 staple additional sheet here